{deleted text} shows text that was in HCR010 but was deleted in HCR010S01.

Inserted text shows text that was not in HCR010 but was inserted into HCR010S01.

DISCLAIMER: This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Representative Edward H. Redd proposes the following substitute bill:

CONCURRENT RESOLUTION ENCOURAGING IDENTIFICATION AND SUPPORT OF TRAUMATIC CHILDHOOD EXPERIENCES SURVIVORS

2017 GENERAL SESSION STATE OF UTAH

Chief Sponsor: Edward H. Redd

Senate	Sponsor:		

LONG TITLE

General Description:

This concurrent resolution encourages state officers, agencies, and employees to promote interventions and practices to identify and treat child and adult survivors of severe emotional trauma and other adverse childhood experiences using interventions proven to help and develop resiliency in these survivors.

Highlighted Provisions:

This resolution:

 highlights recent advances in understanding the impact of adverse childhood experiences on an individual's future outcomes;

- encourages state officers, agencies, and employees to become informed regarding well-documented detrimental short-term and long-term impacts to children and adults from serious traumatic childhood experiences; and
- encourages state officers, agencies, and employees to implement evidence-based interventions and practices that are proven to be successful in developing resiliency in children and adults currently suffering from trauma-related disorders.

Special Clauses:

None

Be it resolved by the Legislature of the state of Utah, the Governor concurring therein:

WHEREAS, there have been recent significant advances in neuroscience with increased understanding of how emotional neglect and exposure to serious trauma affect the way children perceive and interact with their world both during childhood and into adulthood;

WHEREAS, post-traumatic stress disorder and other trauma-related disorders in children and adults can be caused both by exposure to a single severe traumatic incident or by exposure to a cumulative series of serious traumatic events;

WHEREAS, such traumatic incidents and events include emotional and physical abuse and neglect, sexual abuse, separation from or loss of a parent, serious injury or death of a parent, exposure to family discord, domestic violence, parental mental illness, substance abuse, criminal activity in the home, and other traumatic and nonnurturing experiences and environments;

WHEREAS, abuse, neglect, and traumatic events compose part of what has been described in the medical literature as "adverse childhood experiences" or "ACEs," and the cumulative potential impact to a child who has a significant history of exposure to neglect and trauma can be calculated using what is called an ACE score;

WHEREAS, it is now understood that significant exposure to severe traumatic events as outlined above can negatively affect the neurobiology and anatomy of a child's developing brain and result in a substantially impaired ability to absorb new information, develop healthy coping skills, and adapt to life's challenges as the child becomes locked into a "fight-flight-or-freeze" mode that becomes the child's and future adult's default approach when interacting with the world around them;

WHEREAS, children and adults whose brains have been negatively affected by exposure to severe or repeated serious trauma, often experience persistent and sometimes overwhelming dysfunctional emotions of fear, anxiety, depression, hopelessness, and anger, and may exhibit socially inappropriate labile and aggressive behaviors, or may exhibit socially inappropriate emotional detachment and avoidance behaviors;

WHEREAS, these negative coping behaviors and dysfunctional emotions limit a person's capacity to form healthy stable relationships, foster social capital, learn from experiences and mistakes, set and achieve short and long-term goals, and succeed in educational and vocational pursuits;

WHEREAS, in addition to the above negative outcomes, children and adults are more likely to attempt to self medicate trauma-related "fight-flight-or-freeze" anxiety and emotional dysfunction by using available substances such as tobacco, alcohol, prescription medications, and street drugs, including heroin, methamphetamine, cocaine, and cannabis;

WHEREAS, because of the cumulative adverse effects of the above negative outcomes on their physical health and emotional and cognitive capabilities, children and adults affected by severe traumatic events, despite their sincere and best efforts to succeed in life, are more likely to:

- 1. perform poorly in school and other academic pursuits;
- 2. struggle with work performance and sustainable employment;
- 3. become chronically unemployed as adults, resulting in financial stress, reduced quality of life, and increased risk of experiencing long-term disability, homelessness, and other personal and family traumatic experiences;
- 4. become dependent on and addicted to tobacco, alcohol, prescription medications, illicit drugs, and other substances;
 - 5. become directly engaged with law enforcement and the criminal justice system;
- 6. suffer from significant mental illness including depression, psychosis, and severe anxiety leading to suicides and attempted suicides that otherwise would not have occurred;
- 7. suffer from serious physical health problems with poor long-term outcomes that otherwise would not have occurred:
- 8. engage in high-risk sexual behaviors as adolescents and adults, including onset of sexual activity at an early age and multiple sexual partners, resulting in increased risks of

adolescent pregnancy and paternity, other unintended pregnancies, and sexually transmitted diseases;

- 9. experience significant problems and failures in marriage and other intimate partner relationships;
 - 10. become victims or perpetrators of intimate partner violence as adults;
- 11. struggle, despite their sincere efforts, to provide a stable and nurturing environment for their current and future children, resulting in increased likelihood of intergenerational trauma and intergenerational poverty; and
- 12. face a life expectancy shortened by as many as 20 years when compared to average life expectancy for adults who did not experience severe trauma as children;

WHEREAS, with an increase in understanding about the impacts of trauma has come the development of evidence-based questionnaires that identify behaviors and health-related disorders in children and adults that can be indicative of possible trauma-related exposures;

WHEREAS, using these questionnaires can provide the opportunity to identify and refer a child or adult for appropriate additional evaluation and treatment;

WHEREAS, the mental health profession can effectively diagnose and treat trauma-related disorders following evidence-based approaches that have been proven to be successful;

WHEREAS, one example of a well-studied, highly effective and widely available therapy is trauma-focused cognitive behavior therapy;

<u>WHEREAS</u>, early childhood offers an important window of elevated opportunity to prevent, treat, and heal the impacts of adverse childhood experiences and toxic stress on a child's brain and body;

<u>WHEREAS</u>, a critical factor in buffering a child from the negative effects of toxic stress and adverse childhood experiences is the existence of at least one stable, supportive relationship between the child and a nurturing adult;

WHEREAS, with the increase in scientific understanding and ability to identify prevent, and treat trauma-related disorders, there is great hope for thousands of Utah children and adults to begin healing from the negative effects of adverse childhood experiences, develop resiliency, and have brighter, more productive futures than was previously possible; and

WHEREAS, in order to maximize the potential for positive outcomes of

evidence-based interventions in the treatment of severe trauma, it is imperative that employees of the state of Utah and other people who interface directly with vulnerable children and adults become informed regarding the effects of trauma on the human brain and available screening and assessment tools and treatment interventions that lead to increased resiliency in children and adults who struggle in life as the result of trauma-related disorders:

NOW, THEREFORE, BE IT RESOLVED that the Legislature of the state of Utah, the Governor concurring therein, encourages all officers, agencies, and employees of the state of Utah whose responsibilities include working with vulnerable children and adults, such as the Utah State Board of Education, the Utah Department of Human Services, the Department of Workforce Services, the Administrative Office of the Courts, and the Utah Department of Corrections, to:

- 1. become informed regarding well-documented detrimental short-term and long-term impacts to children and adults from serious traumatic childhood experiences as outlined above; and
- 2. implement evidence-based interventions and practices that are proven to be successful in developing resiliency in children and adults currently suffering from trauma-related disorders to help them recover from their trauma and function at their full capacity and potential in school, the workplace, and community, family, and interpersonal relationships.

BE IT FURTHER RESOLVED that a copy of this resolution be sent to the Utah Board of Education, the Utah Department of Human Services, the Department of Workforce Services, the Administrative Office of the Courts, the Utah Department of Corrections, and all political subdivisions of the state of Utah.

BE IT FURTHER RESOLVED that a copy of this resolution be sent to all nonprofit agencies and other entities that contract with the state of Utah to provide services to vulnerable children and adults.

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Office of Legislative Research and General Counsel}